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FACSIMILE MESSAGE

Date April 8, 2002

To: Receptionist - Art Unit 2612

Fax No.: 1 703 308 5359

Subject: United States Patent Application Serial No. 09/113,090

Inventor/Assignor: KIA SILVERBROOK

Assignee: SILVERBROOK RESEARCH PTY LTD

Our Ref: ART34-US

Total Number of Pages (including this) 11

Following is a response to the Advisory Action of March 5, 2002 by Examiner, LKuong Trung Nguyen.

Regards

Leonie News
Silverbrook Research Pty Ltd

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Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$ 570.00)
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Complete if Known	
Application Number	09/113,090
Filing Date	July 10, 1998
First Named Inventor	Kia Silverbrook
Examiner Name	Luong Nguyen
Group Art Unit	2612
Attorney Docket No.	ART34US

<h3 style="text-align: center;">METHOD OF PAYMENT (check all that apply)</h3> <p> <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p>Deposit Account:</p> <table border="1" style="width: 100%;"> <tr> <td>Deposit Account Number</td> <td></td> </tr> <tr> <td>Deposit Account Name</td> <td></td> </tr> </table> <p>The Commissioner is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee in the above identified deposit account. </p> <h3 style="text-align: center;">FEE CALCULATION</h3> <h4>1. BASIC FILING FEE</h4> <table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity / Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>01 740</td> <td>201 370</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>06 330</td> <td>208 165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>07 510</td> <td>207 255</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>08 740</td> <td>208 370</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>14 160</td> <td>214 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1) (\$)</td> <td></td> </tr> </tbody> </table> <h4>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h4> <table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity / Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>93 18</td> <td>203 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>92 84</td> <td>202 42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104 280</td> <td>204 140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109 84</td> <td>209 42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110 18</td> <td>210 9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2) (\$)</td> <td></td> </tr> </tbody> </table> <p><small>** or number previously paid, if greater; For Reissues, see above</small></p>	Deposit Account Number		Deposit Account Name		Large Entity / Small Entity		Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)			01 740	201 370	Utility filing fee		06 330	208 165	Design filing fee		07 510	207 255	Plant filing fee		08 740	208 370	Reissue filing fee		14 160	214 80	Provisional filing fee		SUBTOTAL (1) (\$)				Large Entity / Small Entity		Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)			93 18	203 9	Claims in excess of 20		92 84	202 42	Independent claims in excess of 3		104 280	204 140	Multiple dependent claim, if not paid		109 84	209 42	** Reissue independent claims over original patent		110 18	210 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)				<h3 style="text-align: center;">FEE CALCULATION (continued)</h3> <h4>3. 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8. SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Kia Silverbrook	Registration No. (Attorney/Agent)	
Signature	<i>Kia Silverbrook</i>	Telephone	+61 2 9818 6633
		Date	April 8, 2002

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